# STATE OF CALIFORNIA Budget Change Proposal - Cover Sheet

Kia Cha

<b>Fiscal Year</b> 2022-23	Business Unit 4300	<b>Department</b> Developmenta	l Services		Priority No.		
Budget Reque 4300-071-BCP		Program 4149001 Progra	m Administration	Subprogram			
•	est Description al Software Repla	acement and Elect	ronic Health Recor	d Implementation	on		
The Departm year 2022-23 in 2024-25 an residential fa	, \$2.2 million (\$2 mad ongoing, to place cilities. The reque	ental Services requ nillion General Func an for the replacem sted resources will on the of Technology Pr	d) in 2023-24, and \$ nent of clinical softwallow the Departme	223,000 (\$178,00 ware used at its ent to move thro	00 General Fund) state-operated ough the state-		
Requires Legislation  ☐ Yes ⊠ No			Code Section(s) to be Added/Amended/Repeale				
Does this BCP contain information technology (IT) components? ⊠ Yes □ No			<b>Department CIO</b> Jim Switzgable	<b>Date</b> 4/1/2022			
lf yes, departı must sign.	mental Chief Info	rmation Officer					
•		ject number, the m I the approval date		approval docur	nent (FSR, SPR,		
Project No.43	300-063	Project A	Approval Documer	nt: S1BA			
Approval Da	<b>te:</b> 1/10/2022						
	-	oartment, does other	-				
<b>Prepared By</b> John Wood		<b>Date</b> 4/1/2022	<b>Reviewed By</b> Jim Switzgable		<b>Date</b> 4/1/2022		
<b>Department E</b> Nancy Bargm		<b>Date</b> 4/1/2022	Agency Secre Vishaal Pegan Ghaly MD, MP	y for Mark	<b>Date</b> 4/1/2022		
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PPBA			Date submitted to the Legislature				

4/1/2022

## A. Budget Request Summary

The Department of Developmental Services requests \$1.7 million (\$1.5 million General Fund) in fiscal year 2022-23, \$2.2 million (\$2 million General Fund) in 2023-24, and \$223,000 (\$178,000 General Fund) in 2024-25 and ongoing to plan for the replacement of clinical software used at its state-operated residential facilities (\$OF). This request includes two (2.0) permanent positions, two-year limited-term resources equivalent to three (3.0) positions, and consulting services for two years. The permanent positions would define and track the legal, regulatory, licensing and certification requirements to support clinical functionality, reporting, and compliance efforts. In addition to the position resources, DDS also requests funds to acquire consulting services necessary to complete project planning and preparation activities for the future clinical facility software replacement project.

## B. Background/History

DDS oversees services and supports for individuals with intellectual and developmental disabilities (IDD) to lead independent and productive lives in the communities of their choice. Although California's developmental services system supports nearly all consumers in community-based settings, approximately 300 individuals continue to receive services through state-operated facilities. Individuals in all of DDS' facilities, including Stabilization, Training, Assistance, and Reintegration (STAR) homes, receive internal clinical and professional services, as well as medical/clinical ancillary services and support based on their individual needs. Services may also include the use of local community medical facilities, psychiatric/social services, specialized acute hospital services for complex medical/surgical needs, clinical laboratories, and other diagnostic services.

The transfer of information between internal staff and community providers requires interoperability to facilitate coordination of care, meet immediate behavioral and medical needs, reduce duplication of services and costs, and comply with federal Health and Human Services (HHS) Health Information Technology for Economic and Clinical Health (HITECH) requirements. An electronic health record (EHR) that meets current HHS/Centers for Medicare and Medicaid Services (CMS) requirements will enhance communication and support the process for claiming federal reimbursements.

DDS' internal legacy software, developed 30 years ago, is limited only to individual identifiable data and billing information is input using a paper process. Since then, the needs of the facilities and residents have changed. The Canyon Springs Community Facility, for example, does not have the IT infrastructure for the current custom software ("ER2000 – pharmacy/physician's orders) and must manually process orders by sending them to an outside pharmacy to prepare each month. The facility is required to scan and fax all orders and new or discontinued orders to the contract pharmacy. STAR homes would also benefit from the proposed clinical software solution as they utilize community providers, including general practice and specialty physicians, laboratories, x-ray services, and pharmacies.

## Information Technology Division Resource History

(Dollars in thousands)

Program Budget	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Authorized Expenditures	\$5,079	\$5,608	\$5,718	\$6,399	\$7,088	\$7,649
Actual Expenditures	\$4,901	\$5,180	\$5,699	\$6,130	\$6,659	TBD
Revenues	N/A	N/A	N/A	N/A	N/A	N/A
Authorized Positions	65.0	69.0	67.0	73.0	76.0	77.0
Filled Positions	58.4	60.5	63.2	64.4	71.3	71.0
Vacancies	6.6	8.5	3.8	8.6	4.7	6.0

## **State-Operated Facilities Division\***

(Dollars in thousands)

Program Budget	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22
Authorized Expenditures	N/A	N/A	N/A	\$1,558	\$1,498	\$1,522
Actual Expenditures	N/A	N/A	N/A	\$1,223	\$1,106	TBD
Revenues	N/A	N/A	N/A	N/A	N/A	N/A
Authorized Positions	N/A	N/A	N/A	17.5	17.5	16.5
Filled Positions	N/A	N/A	N/A	13.2	12.1	15.5
Vacancies	N/A	N/A	N/A	4.3	5.4	1.0

<sup>\*</sup>Division was restructured, realigned and renamed in the 2019-20 DDS Reorganization BCP

#### C. State Level Consideration

This project supports DDS' strategic plan to provide leadership that results in quality services to individuals with IDD and the use of community resources to enhance the integration of each individual in the community of their choice.

Consistent with the goals of the California Health and Human Services Agency (CalHHS) and DDS, planning will ensure that the future solution has: a standard technical architecture; facilitates improved business processing efficiencies; supports application integration; and enhances data collection and sharing for improved service delivery for consumers.

#### D. Justification

With the closure of several state-operated developmental centers, a developmental services safety net system was developed to be person-centered, trauma-informed, and to prevent or transition individuals from placements and interventions that are highly restrictive. DDS continues to monitor the changing needs of individuals to develop services that facilitate successful transitions into the community and to develop new programs which may require more coordinated clinical services or medications to support individuals with challenging needs.

DDS has identified the following challenges with the current legacy clinical record system:

- Because the current practice is to track an individual's clinical record utilizing a partial
  electronic and mostly manual process that stores results in a document management system,
  staff are required to utilize multiple systems to enter information or view an individual's clinical
  records, which can lead to delayed consumer services and treatments due to incomplete or
  inaccurate patient information.
- Increased costs from additional tests to determine appropriate medical treatment.

• Difficulty in providing secure telehealth as required by state and federal regulations (42 CFR 410.78).

The EHR solution selected as a result of this project would provide the necessary clinical software supports to more effectively and fully document the services provided to individuals. Replacing the existing legacy software with a modern, community model-based application would also meet the needs of a wider variety of facility types. Additionally, the EHR solution would make it easier for those facilities that provide direct services to be able to electronically transfer individuals' medical records quickly and securely to other medical providers as necessary, thereby complying with critical interoperability capabilities as identified by the Federal Office of the National Coordinator for Health Information and Technology.

Funding in fiscal year 2022-23 and fiscal year 2023-24 includes two-year limited-term resources equivalent to one (1.0) Staff Services Manager I in the State Operated Facilities Division and two (2.0) IT Specialist II positions in the Information Technology Division. The request also includes \$960,000 GF in fiscal year 2022-23 and \$1.4 million GF in fiscal year 2023-24 to acquire consulting services necessary to complete project planning and preparation activities. Ongoing funding supports one (1.0) Health Record Technician III and one (1.0) Research Data Analyst I, both in the State Operated Facilities Division, to define and track legal, regulatory, licensing and certification requirements to support clinical functionality, reporting and compliance efforts.

DDS determined the number of requested positions based on the California Department of Technology's (CDT) project management best practices and recommendations from CalHHS' Office of Systems Integration. Each new position will perform specific roles and duties on the project as detailed in the attached workload analysis.

## E. Outcomes and Accountability

DDS has an approved Stage 1 Business Analysis for this project. Beginning in fiscal year 2022-23, DDS would complete the Alternatives Analysis required by CDT's Project Approval Lifecycle (PAL). The Stage 2 process is projected to be completed in approximately 12 months, then move into Stage 3 Solution Development and, finally, to Stage 4 Readiness and Approval.

## **Projected Outcomes**

Workload Measure	2020-21	2021-22	2022-23	2023-24	2024-25	2025- 26
Project		Stage 1 Business Analysis approval	Stage 2 Alternatives Analysis approval Move into Stage 3	Stage 3 Solution Development Approval, Stage 4 Project Readiness Approval	Project Start	

## F. Analysis of All Feasible Alternatives

**Alternative 1**: Approve \$4.1 million (\$3.8 million GF), over three fiscal years, with \$223,000 (\$178,000 General Fund) ongoing for two (2.0) permanent positions, two-year limited-term resources equivalent to three (3.0) positions, and consulting services to plan for the replacement of clinical software used at state-operated residential facilities. The resources will allow DDS to move through the required CDT PAL process.

#### Pros:

- Improves the integration and coordination of health care and services.
- Provides interoperability to improve the health and wellbeing of individuals through the use of technology.
- Improves the claims process to obtain federal reimbursements.
- Improves the monitoring of service needs to inform resource development.
- Aligns clinical and IT resources with the clinical and business needs of DDS.

#### Cons:

Increased General Fund costs.

## Alternative 2: Maintain status quo.

#### Pros:

No General Fund impact.

#### Cons:

- Lack of technical staff to support and maintain long-term continuity for this initiative.
- Lack of data that impacts the optimal functioning of state-operated residential facilities and planning to support future needs.
- Continues duplication of efforts and increased costs, such as unnecessary testing, and manual sharing of information to provide appropriate care.

## G. Implementation Plan

DDS will develop recruitment packages for new state staff, for posting beginning July 1, 2022. Once hired, new staff will receive training within the first 60 days, with knowledge transfer obtained via current staff within the first six-months.

The implementation plan for this funding request includes the following:

## In fiscal year 2022-23:

- Post job advertisements, interview, and select candidates for the new positions.
- Release solicitations for and select vendors to perform:
  - o Business Analysis and Business Process Reengineering
  - o Organizational Change Management (OCM)
- Coordinate targeted training for clinical and technical staff.

## In fiscal year 2023-24:

- Deliver targeted and continuing education to staff.
- Receive best practice guidance and recommendations from the BA/BPR and OCM vendors to move DDS toward a successful modernization.
- Provide OCM training to the state-operated facility clinical team in preparation for the

implementation of the primary vendor solution.

## H. Supplemental Information

Attachment A: Workload Analysis.

## I. Recommendation

DDS recommends Alternative 1, to approve the \$4.1 million (\$3.8 million GF) over three fiscal years, and \$223,000 (\$178,000) ongoing, for two (2.0) permanent positions, two-year limited-term resources equivalent to three (3.0) positions, and consulting services for two years. The funding will secure the necessary resources to plan for the replacement of clinical software by implementing an EHR solution for use at the department's state-operated residential facilities

# WORKLOAD ANALYSIS Information Technology Division 1.0 Information Technology Specialist II

Tasks and Activities	Annual Hours	FTE		
Define, clarify, and approve business rules, business requirements, and workflow-specific processes. Liaison with existing subject matter experts as needed to refine business documentation. Develop, update, and maintain project documentation: action items, risks and issues, mitigation strategies, project sponsor decisions, project management plans, memos, and etc.	300			
Participate in regular staff meetings (Departmental, Division, Section), project meetings (weekly status, weekly data governance, monthly steering committee, agency/CDT updates), and procurement specific meetings (RFP development, evaluation and scoring, confidential discussions and demonstrations). Prepare for assigned agenda items and status updates. Assist with and facilitate project communications via project meetings, presentations, and status reports.	250			
Work with data governance and conversion preparation team(s) to define data element descriptions and business rules specific to legacy data as well as enterprise-wide data governance.	250			
Track and maintain a list of changes, updates, enhancements, and ad-hoc report requests made to the existing system and update the as-is documentation over the course of the procurement.	200			
Support procurement activities: respond to vendor questions, review draft proposals, score and evaluate final proposals, and attend product demonstrations. Complete assigned project activities, such as procurement activities, adaptive/iterative development assignments, and testing scripts and testing activities.	450			
Work with Organizational Change Management team to develop materials and communicate change to stakeholders and internal departmental staff.	200			
Work on program specific findings as noted in Oversight and Validation & Verification Findings and Reports.	50			
Administrative duties.	100			
Total	1,800	1.0		

# WORKLOAD ANALYSIS Information Technology Division 1.0 Information Technology Specialist II

Tasks and Activities	Annual Hours	FTE
Perform duties as business information system lead by working with program staff and subject matter experts to capture and document business requirements. Maintain system documentation. Create, maintain, and update analysis documentation. Decompose legacy system job steps and existing program functionality. Create business process workflows and assist with the creation of system documentation. Responsible for defining, clarifying and approving business rules, business requirements, and workflow-specific processes. Utilize standard iterative project management and systems development lifecycle methodologies, such as Agile Scrum, Kanban product delivery, and iterative development to achieve project objectives and continuously meet customer needs.	400	
Coordinate and monitor modification to business practices.	240	
Advise project team on program enhancements/changes.	60	
Act as an ongoing point of contact and facilitate communication between business program and technical staff; externally with DGS and DHCS.	120	
Work with stakeholders to meet project deliverables and due dates.	60	
Report project risks to Project Manager using standard project management methodologies.	40	
As needed, complete project management and procurement activities including the creation of project management plans, PAL documents, statements of work, requirements, minimum qualifications, proposal evaluation and scoring, and vendor demonstration.	580	
Participate in ongoing project meetings.	100	
Work with Data Governance on data definitions and data classifications.	100	
Administrative duties.	100	
Total	1,800	1.0

# WORKLOAD ANALYSIS State Operated Facilities Division 1.0 Staff Services Manager I

Tasks and Activities	Annual Hours	FTE
Introduce the project to all state-operated locations and identify program and system subject matter experts at each location.	630	
Initiate an SOF governance committee that can be informed by the DDS IT governance processes.		
Meet regularly with subject matter experts to keep them informed of project progress. Communicate ongoing project goals and deadlines to each location.		
Regular reporting to SOF executive management on project progress, timeliness, and etc.		
Support IT Project Manager to liaison with the multiple state operated locations to map workflows, meet with subject matter experts, understand the differing business needs at each location, mapping legacy systems, and etc.	450	
Map out the timelines, project goals and activities of the HRT and the RDA to ensure they are coordinated and meeting deadlines.	180	
Work with IT to manage project deadlines, ensure timelines are being met, identify blockers and areas for improvement, and etc.	180	
Work as a liaison for all SOF site specific change management activities.	360	
Visit SOF locations to implement change management plans.		
Total	1,800	1.0

# WORKLOAD ANALYSIS State Operated Facilities Division 1.0 Health Records Technician III

Tasks and Activities	Annual Hours	FTE
Facilitate access for all team members to existing data systems at each state-operated facility to support research, assessment, and mapping during the planning phase.	420	
Liaison with Document Management System (DMS) contractor to support assessment of EHR options and tool integration needs.		
Meet with stakeholders at each location to understand training needs of clinical and support staff to support implementation.		
Coordinate with DDS Client Financial Services to elicit system needs and create plans for integration of system functions where indicated.		
Initial training for all staff across all state operated locations regarding system usage.	420	
Ongoing training for staff.		
Regular new employee training at the time of onboarding.		
Train-the-trainer classes for aspects of system use.		
Work with executive management and IT to establish procedures and best practices that can be implemented across all state operated locations for system usage, standards, confidentiality, security, etc.	180	
Quarterly audits at each state-operated location to ensure consistency in documentation standards, regulatory compliance, DSM and coding accuracy, Medicare Compliance, etc.	420	
Train staff at each location to be local system subject matter experts (SME). Maintain a help email/phone line with RDA for issues that cannot be handled by local SMEs.	180	
Regular reporting to SSM I and SOF executive management.	90	
Liaison with Client Financial Services regarding ongoing documentation and billing coordination.	90	
Total	1,800	1.0

# WORKLOAD ANALYSIS State Operated Facilities Division 1.0 Research Data Analyst I

Tasks and Activities	Annual Hours	FTE
Map existing data systems at each state-operated facility.	630	
Meet with stakeholders at each location to understand training and integration needs of legacy systems.		
Coordinate with IT to create plans for integration of data where indicated.		
Coordinate with IT staff at each site to identify workarounds where integration of data is not feasible.		
Facilitate facility subgroups, at least quarterly, to ensure data governance processes are standardized and maintained.	180	
Work with locations to develop data dictionaries and crosswalks between multiple systems.		
Liaison with IT to ensure resolution and appropriate communication of system functioning and integration challenges. See issues through to completion.	450	
Provide IT with quarterly reports including analysis on trends and opportunities for improvement at the different locations.		
Quarterly data audits.	270	
Regular reporting to SSM I and SOF executive management.		
Liaison with quality assurance risk management and research division.	90	
Maintain a help email/phone line with HRT for issues that cannot be handled by local SMEs.	180	
Total	1,800	1.0

# **BCP Fiscal Detail Sheet**

BCP Title: Facility Clinical Software Replacement and Electronic Health Record Implementation

BR Name: 4300-071-BCP-2022-A1

**Budget Request Summary** 

# **Personal Services**

Personal Services	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
Positions - Permanent	0.0	2.0	2.0	2.0	2.0	2.0
Positions - Temporary	0.0	3.0	3.0	0.0	0.0	0.0
Total Positions	0.0	5.0	5.0	2.0	2.0	2.0
Earnings - Permanent	0	115	115	115	115	115
Earnings - Temporary Help	0	311	311	0	0	0
Total Salaries and Wages	\$0	\$426	\$426	\$115	\$115	\$115
Total Staff Benefits	0	237	237	64	64	64
Total Personal Services	\$0	\$663	\$663	\$179	\$179	\$179

# Operating Expenses and Equipment

Operating Expenses and Equipment	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
5301 - General Expense	0	10	10	4	4	4
5302 - Printing	0	5	5	2	2	2
5304 - Communications	0	5	5	2	2	2
5306 - Postage	0	5	5	2	2	2
5320 - Travel: In-State	0	15	15	6	6	6
5322 - Training	0	5	5	2	2	2
5324 - Facilities Operation	0	40	40	16	16	16
5340 - Consulting and Professional Services - External	0	960	1,400	0	0	0
5346 - Information Technology	0	25	25	10	10	10
Total Operating Expenses and Equipment	\$0	\$1,070	\$1,510	\$44	\$44	\$44

# Total Budget Request

Total Budget Request	FY22 Current Year	FY22 Budget Year	FY22 BY+1	FY22 BY+2	FY22 BY+3	FY22 BY+4
Total Budget Request	\$0	\$1,733	\$2,173	\$223	\$223	\$223

# Fund Summary

# Fund Source

Fund Source	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
State Operations - 0001 - General Fund	0	1,578	2,018	178	178	178
0995 - Reimbursements	0	155	155	45	45	45
Total State Operations Expenditures	\$0	\$1,733	\$2,173	\$223	\$223	\$223
Total All Funds	\$0	\$1,733	\$2,173	\$223	\$223	\$223

# **Program Summary**

# Program Funding

Program Funding	FY22 Current Year	FY22 Budget Year	FY22 BY+1	FY22 BY+2	FY22 BY+3	FY22 BY+4
4149001 - Program Administration	0	1,733	2,173	223	223	223
Total All Programs	\$0	\$1,733	\$2,173	\$223	\$223	\$223

# Personal Services Details

# **Positions**

Positions	FY22	FY22	FY22	FY22	FY22	FY22
	Current Year	Budget Year	BY+1	BY+2	BY+3	BY+4
1414 - Info Tech Spec II (Eff. 07-01-2022)(LT 06-30-2024)	0.0	2.0	2.0	0.0	0.0	0.0
1873 - Hith Recd Techn III (Eff. 07-01-2022)	0.0	1.0	1.0	1.0	1.0	1.0
4800 - Staff Svcs Mgr I (Eff. 07-01-2022)(LT 06-30- 2024)	0.0	1.0	1.0	0.0	0.0	0.0
5729 - Research Data Analyst I (Eff. 07-01-2022)	0.0	1.0	1.0	1.0	1.0	1.0
Total Positions	0.0	5.0	5.0	2.0	2.0	2.0

# Salaries and Wages

Salaries and Wages	FY22	FY22	FY22	FY22	FY22	FY22
_	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
1414 - Info Tech Spec II (Eff. 07-01-2022)(LT 06-30-2024)	0	216	216	0	0	0
1873 - Hlth Recd Techn III (Eff. 07-01-2022)	0	57	57	57	57	57
4800 - Staff Svcs Mgr I (Eff. 07-01-2022)(LT 06-30-2024)	0	95	95	0	0	0
5729 - Research Data Analyst I (Eff. 07-01-2022)	0	58	58	58	58	58
Total Salaries and Wages	\$0	\$426	\$426	\$115	\$115	\$115

# Staff Benefits

Staff Benefits	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
5150350 - Health Insurance	0	29	29	8	8	8
5150500 - OASDI	0	33	33	9	9	9
5150630 - Retirement - Public Employees - Miscellaneous	0	125	125	34	34	34
5150800 - Workers' Compensation	0	1	1	0	0	0
5150820 - Other Post-Employment Benefits (OPEB)	0	15	15	1	1	1
Employer Contributions	U	13	13	7	7	7
5150900 - Staff Benefits - Other	0	34	34	9	9	9

Staff Benefits	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
Total Staff Benefits	\$0	\$237	\$237	\$64	\$64	\$64
Total Personal Services						
Total Personal Services	FY22	FY22	FY22	FY22	FY22	FY22
	Current	Budget	BY+1	BY+2	BY+3	BY+4
	Year	Year				
Total Personal Services	\$0	\$663	\$663	\$179	\$179	\$179